



A "Vision" for the Future

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Life expectancy from time of birth has increased by more than 30 years in the past century. The result is a paradigm shift of age-related inflictions of non-communicable diseases and disabilities associated with ageing. It is evident from these trends that, in most developed countries, the last 8-11 years of our life are accompanied by disability. Since the last years of life are associated with increased disability and sickness, this will put enormous demands on social and health services and drive the costs for care up. Terms like "disability-free" life expectancy, healthy life expectancy, and "active life expectancy" have been proposed by WHO.

The population of individuals aged 60 and older will drive social and economic systems. In developing regions, the growth of the population aged >60 years is accelerating. By 2030 this population is projected to grow by 71% or 1 billion people aged ≥60 years will reside in the less developed regions. Approximately 1.7 billion people aged ≥60 years, nearly 80 per cent of the world's older population, will live in the less developed regions in 2050.

Despite this significant population and projected growth, the large nursing home population is underserved in their visual health.¹ More than 2 billion people worldwide suffer vision problems that range from impairment to blindness, according to a new report from the World Health Organization. They suffer from a high prevalence and severity of blinding eye disease even though most eye disease and blindness can be managed, treated, or prevented.²⁻⁴ Approximately 12.44 million people age forty years and older experience vision problems in the United States, more than 1 million people were blind, 3.22 million people had vision impairment and 8.2 million people who suffered vision impairment because of uncorrected refractive error.

Age-related vision impairment leads to increased physical disability, reduced mental well-being, and severe depressive symptoms or overall mortality, and it is associated with a greater frequency of falls, often resulting in long-term disabilities. However, a comprehensive characterization of visual impairment and blindness among nursing home residents is

lacking. Knowledge about older people living in community settings continues to be refined, however, the circumstances related to vision and eye health of people residing in nursing homes remains fragmented, incomplete, and neglected.

Maintaining good vision is an important part of 'active ageing', a concept promoted by the World Health Organization. Despite the fact that much visual impairment in older people is due to correctable conditions such as refractive error and cataract, older people in many countries still suffer from these conditions. Older people face particular challenges when accessing health care, including eye care. One of the reasons is that, as people age, many health problems can occur at the same time. In the presence of multiple health problems, vision problems probably assume a lesser importance; in addition, these other health problems can make it physically more difficult for an older person to access eye care. Expectations and activities also decrease with age, which affects older people's desire to seek help with their health problems, including eye problems.

More research is needed to evaluate dimensions for elderliness such as cost of social isolation and community welfare services, cost of injuries like hip fractures due to falls and costs of declining cognitive health, depression and dementia.

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